

Message Text

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SUBJECT: INDIA'S NATIONAL POPULATION POLICY REVEALED

SUMMARY:

INDIA'S MUCH AWAITED NATIONAL POPULATION POLICY WAS RELEASED YESTERDAY

BY THE UNION HEALTH MINISTER DR. KAREN SINGH. THE POLICY PROVIDES FOR RAISING THE AGE OF MARRIAGE TO 18 FOR GIRLS AND 21 FOR BOYS; HIGHER GRADED MONETARY COMPENSATION FOR INDIVIDUAL ACCEPTANCE OF FAMILY PLANNING; INTRODUCTION OF GROUP INCENTIVES AND IMPLEMENTATION OF A NEW MULTIMEDIA MOTIVATION STRATEGY; FREEZING OF THE POPULATION BASE AT THE 1971 LEVEL FOR DETERMINING CENTRAL PLAN ALLOCATIONS TO STATES AND THE REPRESENTATION IN THE LOK SABHA AND 8 PERCENT OF CENTRAL ASSISTANCE TO STATE PLANS WILL BE SPECIFICALLY EARMARKED AGAINST PERFORMANCE IN FAMILY PLANNING.

THE MINISTER STATED THAT NO CENTRAL LEGISLATION FOR COMPULSORY UNCLASSIFIED

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STERILISATION IS BEING FRAMED NOW, BUT THE STATES WOULD BE FREE TO

DEVELOPE THEIR OWN LAWS IF THEY FEEL THIS IS NECESSARY. END SUMMARY.

1. AFTER THE PRIME MINISTER'S CONSULTATIONS WITH THE STATE CHIEF MINISTERS IN DELHI ON THURSDAY, THE UNION HEALTH MINISTER, DR. KAREN SINGH ANNOUNCED THE NATIONAL POPULATION POLICY YESTERDAY TO THE MEETING OF THE INDIAN CENTRAL COUNCIL OF HEALTH AND THE CENTRAL FAMILY PLANNING COUNCIL. THE MINISTER SAID THAT WITH 2.4 PERCENT OF THE WORLD'S LAND AREA INDIA HAS ABOUT 15 PERCENT OF THE WORLD'S PEOPLE. THE POPULATION HAS CROSSED THE 600 MILLION MARK AND IS NOW RISING AT THE RATE OF OVER ONE MILLION MONTH. IF THIS INCREASE IS NOT CHECKED, THE POPULATION AT THE TURN OF THE CENTURY WILL REACH THE STAGGERING FIGURE OF ONE BILLION. THE MINISTER INDICATED THAT "IF THE FUTURE OF THE NATION IS TO BE SECURED AND THE GOAL OF REMOVING POVERTY TO BE ATTAINED, THE POPULATION PROBLEM WILL HAVE TO BE TREATED AS A TOP NATIONAL PRIORITY AND COMMITMENT. HE SAID THAT THE MAGNITUDE OF THE TASK INVOLVED REVERSING THE CENTURIES OLD TREAT, AND THIS WOULD HAVE TO BRING ABOUT A FUNDAMENTAL PSYCHOLOGICAL CHANGE. HE ALSO EXPLAINED THAT THE PACKAGE OF INCENTIVES AND DISINCENTIVES WOULD NOT VICTIMIZE OR PUNISH THOSE WHO WERE ALREADY BORN, " TO WAIT FOR EDUCATION AND ECONOMIC DEVELOPMENT TO BRING ABOUT A DROP IN FERTILITY IS NOT A PRACTICAL SOLUTION. THE VERY INCREASE IN POPULATION MAKES ECONOMIC DEVELOPMENT SLOW AND MORE DIFFICULT TO ACHIEVE".

2. THE MAIN FEATURES OF THE POPULATION POLICY AS OUTLINED BY THE HEALTH MINISTER ARE:

TO RAISE THE MINIMUM MARRIAGE AGE FOR BOYS TO 21 YEARS AND FOR GIRLS TO 18 YEARS. ANY VIOLATION TO THE PROPOSED LAW, EXPECTED TO BE ENACTED BEFORE THE END OF THE YEAR, WOULD BE A PUNISHABLE OFFENCE. THE PRESENT ACT PRESCRIBING THE MINIMUM AGE OF 14 FOR GIRLS AND 18 FOR BOYS IS VIRTUALLY INOPERATIVE.

THE REPRESENTATION IN THE LOK SABHA AND STATE LEGISLATURES WILL BE FROZEN ON THE BASIS OF THE 1971 CENSES, UNTIL THE YEAR 2001. THIS IS TO ENSURE THAT STATES NOT RESPONDING TO BIRTH CONTROL MEASURES DO

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NOT GET A PREMIUM BY WAY OF ADDITIONAL SEATS PROPORTIONATE TO AN INCREASE IN THEIR POPULATION. THIS WILL REQUIRE A CONSTITUTIONAL AMENDMENT.

IN THE ALLOCATION OF CENTRAL ASSISTANCE TO STATE PLANS, DEVOLUTIONS TO TAXES AND DUTIES AND GRANT-IN-AID, THE 1971 FIGURES WILL CONTINUE TO BE FOLLOWED UNTIL 2001. THE CENTRAL GOVERNMENT WILL ALSO EARMARK 8 PERCENT OF THE PLAN FUNDS TO

STATES AGAINST PERFORMANCE IN THE FAMILY PLANNING PROGRAM.

SPECIAL MEASURES TO RAISE THE LEVELS OF FEMALE EDUCATION ESPECIALLY IN THE BACKWARD STATES WILL BE TAKEN. FAMILY PLANNING PERFORMANCE IN THESE AREAS HAS, SO FAR, BEEN UNIMPRESSIVE.

THE PRIME MINISTER WILL ISSUE A DIRECTIVE TO ALL THE UNION MINISTRIES AND STATES THAT THEY SHOULD TAKE UP AS AN INTEGRAL PART OF THEIR NORMAL PROGRAM AND BUDGETS THE MOTIVATION OF CITIZENS TO ADOPT RESPONSIBLE REPRODUCTIVE BEHAVIOR IN THEIR OWN AND NATIONAL INTEREST.

MONETARY COMPENSATION FOR STERILIZATION (BOTH MEN AND WOMEN) WILL BE RAISED TO RS 150 IF PERFORMED WITH TWO LIVING CHILDREN OR LESS; RS 100 WITH THREE LIVING CHILDREN AND RS 70 WITH FOUR OR MORE.

EMPLOYEES OF THE CENTRAL GOVERNMENT WILL BE EXPECTED TO ADOPT THE SMALL FAMILY NORM AND NECESSARY CHANGES WILL BE MADE IN THEIR SERVICE AND CONDUCT RULES.

GROUP INCENTIVES WILL BE INTRODUCED FOR THE MEDICAL PROFESSION THE PANCHAYAT SAMITIS (VILLAGE LEADERS) TEACHERS AND OTHER SOCIETIES AND LABOR ORGANIZATIONS VOLUNTEER ORGANIZATIONS WILL ALSO BE REWARDED FOR PERFORMANCE.

RESEARCH FUNDS FOR REPRODUCTIVE BIOLOGY AND FERTILITY CONTROL WILL BE EXPANDED AND ENSURED ON A LONG-RANGE BASIS.

3. ON THE QUESTION OF COMPULSORY STERILIZATION THE MINISTER INDICATED THAT PUBLIC OPINION WAS NOW READY TO ACCEPT MUCH MORE STRINGENT MEASURES FOR FAMILY PLANNING THAN BEFORE. HOWEVER, THE MEDICAL AND ADMINISTRATIVE INFRASTRUCTURE IN MANY PARTS OF UNCLASSIFIED

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THE COUNTRY WERE NOT ADEQUATE TO COPE WITH THIS ENORMOUS TASK. CONSEQUENTLY, HE SAID, THERE WILL BE NO CENTRAL LEGISLATION FOR SOME TIME TO COME. HOWEVER, HE CONTINUED, IF SOME OF THE STATES FEEL THAT THE FACILITIES ARE ADEQUATE TO MEET THE REQUIREMENTS OF COMPULSORY STERILIZATION IT (THE STATE) MAY ENACT THE LEGISLATION KAREN SINGH MENTIONED THAT HIS ADVICE WOULD BE TO THESE STATES TO MAKE THE LEGISLATION TO THE LIMIT OF THREE CHILDREN AND MAKE IT UNIFORMLY APPLICABLE TO ALL INDIAN CITIZENS WITHOUT DISTINCTION OF CASTE, CREED OR COMMUNITY.

4. ANSWERING THE QUESTIONS OF NEWSMEN AT A PRESS CONFERENCE FOLLOWING THE ANNOUNCEMENT, THE HEALTH MINISTER SAID HE WOULD LIKE TO PUT THE POLICY IN PERSPECTIVE BY REITERATING THE LESS PUBLICISED POLICY OF THE GOVERNMENT TO HELP THE INFERTILE MALES AND FEMALES HAV

E
CHILDREN AND LIVE HAPPILY. THE POPULATION POLICY WAS NOT
ANTI-CHILDREN BUT TO LIMIT FAMILY SIZE AND ENSURE THE
QUALITY OF LIFE.

5. THE EMBASSY WILL MAKE FURTHER COMMENTS ON THE NEW
NATIONAL POPULATION POLICY AFTER DISCUSSING THE ISSUES WITH
HEALTH AND FAMILY PLANNING LEADERS AND OTHERS. WE WILL ALSO PREPARE
AN UP TO DATE BREAKDOWN OF PROPOSED COMPULSORY STERILIZATION
LAWS IN THE STATES THAT ARE ACTIVELY PREPARING LEGISLATION.
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